



IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Applicant:

Robert Kopetzky

Title:

A DRIVE UNIT FOR A SAFETY

BELT TENSIONER

Appl. No.:

Unassigned

Filing Date: Herewith

Examiner:

Unassigned

Art Unit:

Unassigned

UTILITY PATENT APPLICATION TRANSMITTAL

Commissioner for Patents Box PATENT APPLICATION Washington, D.C. 20231

Sit: C

Transmitted herewith for filing under 37 C.F.R. § 1.53(b) is the nonprovisional utility patent application of:

SOF

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Applicant claims small entity status under 37 CFR 1.27.

Enclosed are:

- IX | Specification, Claim(s), and Abstract (10 pages).
- [X] Informal drawings (1 sheets, Figures 1-3).
- [X] Declaration and Power of Attorney (2 pages).
- [X] Assignment of the invention to TAKATA-(EUROPE) Vehicle Safety Technology GmbH.
- [X] Assignment Recordation Cover Sheet.
- IX1 Check in the amount of \$40.00 for Assignment recordation.
- Small Entity statement.
- [] Request for application not to be published with certification under 35 USC 122(b)(2)(B)(i).
- [X] Preliminary Amendment (4pp)
- [X] Information Disclosure Statement.
- X 1 Form PTO-1449 with copies of 2 listed reference(s).
- [X] Correspondence Change of Address
- [] Application Data Sheet (37 CFR 1.76).

The filing fee is calculated below:

	Claims		Included in		Extra				Fee
	as Filed	Basic Fee			Claims	Rate		Totals	
Basic Fee							\$740.00		\$740.00
Total Claims:	10	-	20	ᄪ	0	×	\$18.00	==	\$0.00
Independents:	2	- '	3	105	0	×	\$84.00	=	\$0.00
If any Multiple Dependent Claim(s) present: + \$:						\$280.00	=	\$0.00	
							SUBTOTAL:	=	\$740.00
[]	Small	Enti	ity Fees A	Appl	y (subtra	ct 1/2	of above):	=	\$0.00
	TOTAL FILING FEE:							==	\$740.00

- A check in the amount of \$740.00 to cover the filing fee is enclosed.
- [] The required filing fees are not enclosed but will be submitted in response to the Notice to File Missing Parts of Application.
- The Commissioner is hereby authorized to charge any additional fees which may be required regarding this application under 37 C.F.R. §§ 1.16-1.17, or credit any overpayment, to Deposit Account No. 19-0741. Should no proper payment be enclosed herewith, as by a check being in the wrong amount, unsigned, postdated, otherwise improper or informal or even entirely missing, the Commissioner is authorized to charge the unpaid amount to Deposit Account No. 19-0741.

Please direct all correspondence to the undersigned attorney or agent at the

address indicated below.

2/19/2002

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Respectfully submitted,

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